

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MNR		2/21/00
O.I.P.E. CLASSIFIER	KS	8	02-15-00
FORMALITY REVIEW		7175	2/27/00
RESPONSE FORMALITY REVIEW		60362	8/4/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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